

<b>Commonwealth of Massachusetts Division of Medical Assistance Provider Manual Series</b>  PERSONAL CARE MANUAL	<b>SUBCHAPTER NUMBER AND TITLE</b> 6 SERVICE CODES AND DESCRIPTIONS		<b>PAGE</b> 6-1
	<b>TRANSMITTAL LETTER</b> PCA-14	<b>DATE</b> 12/01/03	

## 601 Service Codes and Descriptions

Service

Code   Modifier   Service Description

### **Personal Care Management (PCM) Services**

- 99456      Work related or medical disability examination by other than the treating physician that includes:
- completion of a medical history commensurate with the patient's condition;
  - performance of an examination commensurate with the patient's condition;
  - formulation of a diagnosis, assessment of capabilities and stability, and calculation of impairment;
  - development of future medical treatment plan; and
  - completion of necessary documentation/certificates and report.  
(use this code when billing for initial evaluation of a member to determine the need and extent of the need for personal care services) (per evaluation)
- 99456    TS      Work related or medical disability examination by other than the treating physician that includes:
- completion of a medical history commensurate with the patient's condition;
  - performance of an examination commensurate with the patient's condition;
  - formulation of a diagnosis, assessment of capabilities and stability, and calculation of impairment;
  - development of future medical treatment plan; and
  - completion of necessary documentation/certificates and report.  
(follow-up service) (use this code and modifier when billing for reevaluation of a member to determine the need and extent of the need for personal care services.) (per evaluation)
- T2022      Case management, per month (current P.A. for PCA services required for each member)  
(Use this code to bill for functional skills training.) (per member per month)
- T1023      Screening to determine the appropriateness of consideration of an individual for participation in a specified program, project, or treatment protocol, per encounter (Use this code to bill a single per member per month charge for intake and orientation services provided to a member who does not yet have a PA for PCA services.) (maximum 3 consecutive months)

### **Fiscal Intermediary (FI) Services**

- T1019      Personal care services per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant) (P.A.), (Use this code to bill for PCA services provided during day or night.)
- T1019    TU      Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant) special payment rate, overtime (P.A.) (Use this code and modifier to bill for premium pay for overtime.)

<b>Commonwealth of Massachusetts Division of Medical Assistance Provider Manual Series</b>  PERSONAL CARE MANUAL	<b>SUBCHAPTER NUMBER AND TITLE</b> 6 SERVICE CODES AND DESCRIPTIONS		<b>PAGE</b> 6-2
	<b>TRANSMITTAL LETTER</b> PCA-14	<b>DATE</b> 12/01/03	

601 Personal Care: Service Codes (cont)

Service

Code   Modifier   Service Description

99054            Services requested on Sundays and holidays in addition to basic service (P.A.) (premium rate only, applies only to holidays) (per 15 minutes)

T1020            Personal care services, per diem, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant) (Use to bill for fiscal intermediary administrative charge; 1 unit per diem.) (current P.A. for PCA services required for each member)

**Transitional Living Services**

T1020    U1            Personal care services, per diem, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant) (Medicaid level of care 1) (P.A.) (Use this code and modifier to bill for transitional living services.)

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